

COQUILLE INDIAN TRIBE

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Testimony of Kelle Little Coquille Indian Tribe Health and Human Services Administrator, Coos Bay, Oregon Before the Oregon Joint Committee on Ways and Means – Human Services Subcommittee OHA Public Health Division Budget Hearing Regarding Public Health Modernization Tuesday, March 26, 2019

Thank you for the opportunity to provide written testimony today. My name is Kelle Little and I am the Coquille Indian Tribe Health and Human Services Administrator and the tribal representative to the Oregon Public Health Advisory Board (OPHAB). Oregon's federally recognized Tribes are a critical component of Oregon's governmental public health system. In addition, tribal members often bear a disproportionate burden of preventable disease, injury, and death.

The Coquille Indian Tribe is actively engaged in **Public Health Modernization** to the extent possible with no dedicated funding. We participate in the Public Health Modernization Partnership with Douglas, Coos and Curry public health authorities, Advanced Health CCO, and the Cow Creek Band of the Umpqua Tribe of Indians. The focus of the Partnership is to improve and standardize mandatory communicable disease reporting and implement strategies for improving immunization rates in children whom are two years old, focusing on those living in high poverty communities.

The Coquille Indian Tribe completed the Tribal Public Health Modernization Assessment. The Assessment provided an opportunity to reflect and assess our current public health capacities and capabilities. We are using the results in our strategic planning and prioritization of our limited public health resources. For example, using data gathered from the Public Health Modernization Assessment along with other input, the Coquille Indian Tribe elected to prioritize development of an Emergency Preparedness Mass Care Plan and health alert notification for the Coquille Indian Tribe's 2019-2022 Strategic Plan.

If adequate resources were available for other federally recognized tribes to participate in the assessment and subsequent planning and implementation, strengths and opportunities could be leveraged among the tribes as well as across the entire public health system. For example, the tribes could develop a system to share tribal community health data in a manner which respects tribal sovereignty, but also describes the health inequities among Oregon's tribal residents.

The Coquille Indian Tribe would welcome additional resources to develop and implement a tribal public health modernization plan, and thus accelerate modernizing our part of the public health system so that all tribal members and others in our community can achieve better health.

Thank you for the consideration,

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